

logical factors. Half of the patients were recruits which tends to show that the sudden change from domestic life and work to the arduous conditions of military service is not without its effect on the nervous condition of the Russian soldier.

The treatment of the hystero-epileptic cases was always unsuccessful, neither water, electricity, nor narcotics appearing to exert any influence over the frequency or severity of the attacks. The cure of the paralytic forms of the disease was successfully accomplished by means of exercise, gymnastics, etc.

GRACE PECKHAM.

MENTAL PATHOLOGY.

Report of a Case of Insanity Following Gunshot Injury to the Head ; Cerebral Cyst ; Aspiration ; Recovery.

By C. F. McDONALD, M.D., Auburn, N. Y. *Amer. Jour. Med. Science*, April, 1886.

Dr. McDonald here gives an excellent report of a most interesting case. Darwin Dingman, æt. twenty-seven, a criminal, was committed to prison for having attempted to shoot his wife. The attempt being unsuccessful, he shot himself in the head with suicidal intent. The ball was removed very soon thereafter. He was sent to the State Reformatory Feb., 1883. In June, 1885, he was committed to the State Asylum for Insane Criminals. The mental disturbance had existed several weeks previously. On admission to the asylum the patient was in a state of violent maniacal excitement ; he refused food, and objected to any examination of the head. An examination of the head revealed a nearly circular depression of the skull about half an inch in diameter and about a fourth of an inch deep at the centre. The skull lesion was located, as nearly as could be determined by external measurement, over the right first frontal gyrus at a point corresponding to the junction of its anterior and middle third. The least pressure upon the depression was extremely painful. The mental disturbance was not unnaturally referred to the skull lesion, and an operation was decided upon.

Finding the skull pervious (the opening in the skull was not closed by bony union), the hypodermic syringe was inserted in three several directions—no result ; on the fourth insertion, however, the direction of the needle being downward, forward, and outward, clear serous fluid was discovered, and nearly two drachms of this serum were removed. As soon as the effect of the ether had passed off the patient began to converse rationally, and three hours later gave all the circumstances of the shooting, as detailed above. Several months later he is reported as being in excellent health.

Dr. McDonald draws several conclusions from this case : 1—That lesions of the præfrontal lobes are not accompanied by motor or sensory disturbances. 2—That when not in a state of inflammation, the brain substance may be punctured with a fine, clean

needle with comparative immunity from danger or disturbance of function. 3—That the recovery in Dingman's case was directly due to the operation. 4—That the prognosis in cases of traumatic insanity is not necessarily bad if surgical interference be allowed.

B. S.

Phthisis and Insanity. Dr. R. H. BENNER (*Alienist and Neurologist*, April, 1886) says that phthisis manifests itself through the mind by the presence of suspicious delusions and hallucinations and their consequences—irritability, moodiness, unsociability, and extreme selfishness. In the discussion of this paper Dr. J. P. Brown expressed a doubt as to the existence of a specific form of insanity associated with phthisis. Dr. Stearns reported a case in which the mental symptoms disappeared when the physical symptoms became prominent. That phthisis does have peculiar relations to insanity, and does often give a peculiar tinge to the psychosis coexisting with it, has long been accepted as proven by alienists. Dr. Savage ("Insanity," p. 400) sums up the relationship between the two diseases as follows: Phthisis in the insane is associated with certain groups of symptoms, characterized by suspicion and refusal of food on the one hand, and with masking of the physical symptoms on the other. Sanity not uncommonly returns before death in phthisical lunatics, and some recover sanity to die, in a year or two, of phthisis. Van der Kolk ("Mental Diseases") says that insanity and phthisis alternate, and similar observations have been made by Bucknill-Tuke, Ball, Langlois, Neumann, Clouston, Griesinger, and others. As early as 1819 Dr. Jas. S. Macdonald ("Records of the New York Hospital") called attention to the relations between phthisis and insanity, already mentioned in the case of Guiteau's paternal uncle, who died in the Bloomingdale insane hospital in 1819.

Insanity Among Convicts. The report of the Illinois State Penitentiary for 1884, shows, that of two hundred and sixty-nine convicts sent to that institution for murder, sixteen or six per cent. had ultimately to be sent to an insane hospital. The medical officer, is a homœopathic renegade from the regular profession, whose knowledge of medicine may be judged from the fact that he reports a death from "malingering," hence this percentage must be very much under the mark, more especially as the institution is run on a purely politico-commercial basis. So long as a convict is able to work there is no examination of his mental state. How rarely insanity is likely to be detected, is shown by the case of the paranoiac cited in the February number of the JOURNAL, who, despite the fact that he cut his thumb off and then his throat, was not regarded as insane. Even these meagre statistics show that insanity is thirty-two times more frequent among homicidal convicts than it is among Illinois citizens, generally speaking. There were nineteen convicts sent to the insane